

**PROSTATE CANCER RESEARCH
TRUSTEES' REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

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PROSTATE CANCER RESEARCH REFERENCE AND ADMINISTRATIVE DETAILS

CHARITY NAME	Prostate Cancer Research
CHARITY REGISTRATION NUMBER	1156027
REGISTERED OFFICE	Suite 2 23-24 Great James Street London WC1N 3ES
PRINCIPAL OFFICE	Suite 2 23-24 Great James Street London WC1N 3ES
TRUSTEES	Matthew Ellis, Chair of Trustees Michele Hunter (resigned 11 July 2022) Shaun Grady Ben Monro-Davies Mark Clark Suman Shirodkar MBBS, PHD Richard Collier Jonathan Badger Ameet Gill OBE Trevor Back Marcella Turner Louisa Fleur (appointed 7 March 2023)
EXECUTIVE DIRECTOR	Oliver Kemp
HONORARY TREASURER	Ceri Evans
BANKERS	Lloyds TSB Oxford Street London BX1 1LT HSBC 39 Tottenham Court Road London W1T 2AR Barclays Bank plc London Bridge Branch 29 Borough High Street London SE1 1LY
AUDITOR	Crowe U.K. LLP Aquis House 49-51 Blagrove Street Reading RG1 1PL

**PROSTATE CANCER RESEARCH
CHAIRMAN'S LETTER
FOR THE YEAR ENDED 31 MARCH 2022**

I am delighted to report that 2022/23 was another year of record performance for Prostate Cancer Research ("PCR") in our core activity of funding ground breaking research. We initiated a new grant call and funded three new research projects, achieving our ambitious goal of funding 23 research projects by 2023 with 10 months to spare. In total, we invested £1.5 million in research in 2022/23, a 27% increase on last year and our most ever by a considerable margin. This was made possible by our best ever fundraising outcome - for the first time we recorded over £3 million in income, almost three times our income in 2020/21 and an average annual growth rate of 14% over the last six years.

Equally importantly, we also made significant progress with our major internal projects and initiatives, broadening our patient impact into new areas.

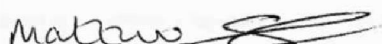
- Our flagship patient project, the infopool (www.theinfopool.co.uk), was completed during the year and launched to the public in April 2023. The infopool website allows people affected by prostate cancer to explore and better understand diagnosis and testing, the various treatment pathways, access clinical trials, and to hear first-hand experiences of fellow patients.
- We have successfully funded our data platform for prostate cancer patients, with backing from major pharma companies including Bayer and Advanced Accelerator Applications (a Novartis Company). We hope that once developed this platform will be a valuable tool for the research community who need more data, more samples, and a better understanding of patient experience than is currently available.
- We have also engaged with medicines assessment agencies for the first time, achieving consultee status with the National Institute for Health and Care Excellence ("NICE") and the Scottish Medicines Consortium ("SMC"). As part of this, we have participated in reviews of Pluvicto, Nubeqa, and Lynparza, working with a range of stakeholders to help convince NICE to reconsider their decision not to approve Pluvicto, and the successful agreement with the NHS to roll-out Lynparza to the 550 men in England with advanced prostate cancer who will be eligible for this life-extending treatment.

These new initiatives expand our scope beyond our historical focus as a funder of academic research and may more naturally be categorised as awareness, support or influencing. However, there is a strong research angle to each, and we believe they are consistent with our mission to develop and deliver breakthrough medicines and treatments. After all, there is little point in funding research if it cannot ultimately benefit patients. When combined with our expanded research activities and growing support of translational research, we believe that we have created an engine for accelerating prostate cancer research in the UK and US which will benefit prostate cancer patients and their families for years to come.

Having delivered on many of the goals of our 2020-23 strategy, we are in the process of developing a new strategy for 2024-27 which will guide how we invest our time and resources in the years ahead. Even though we are investing in more research than ever before, the amount of research and projects that we could fund is also greater than ever, as our capabilities, experiences, and understanding of the challenges faced by prostate cancer patients grow. Every project that we do not have the resources to fund is a missed opportunity to deliver our mission to develop breakthrough treatments and diagnostics for the benefit of our patient population, and we are committed to growing our income which will allow us to fund more of these exciting initiatives.

We would like to thank everyone who has supported PCR in the last twelve months. At our recent "Meet the Scientists" event, a patient told a member of staff that meeting with dozens of researchers that PCR funds gives them hope that there is an army of people working on their behalf to find better treatments. I thought this perfectly captured the impact that PCR has and why the organisation is so important to thousands of people affected by prostate cancer every year. None of this would be possible without your generous support, and we invite you to join us on our journey as we move closer to our vision of a world free from the impact of prostate cancer.

Yours sincerely,



Matthew Ellis, Chair of Trustees

PROSTATE CANCER RESEARCH TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022

Objectives and activities

The objects of the charity are the promotion of medical and scientific research into the causes and treatment of cancer and related diseases and the dissemination of the useful results thereof. The charity carries out these objects by funding research that aims to improve the survival of men with advanced prostate cancer.

Our vision is a world where people are free from the impact of prostate cancer.

Our mission is that together, we will develop and deliver breakthrough medicines and treatments.

Achievements during the year

Academic Research Highlights

We funded three new projects during the year as part of our racial inequalities in prostate cancer programme, including:

- Dr. Panagiotis Katsonis at Baylor College of Medicine who will be identifying race specific variants, pathways, and genes that drive prostate cancer risk in Black men compared to White men.
- Dr Stancy Liou at Clark University Atlanta, who will be looking to establish the role of the immune system in racial disparities in prostate cancer by assessing whether B cells play a role in the development and progression of prostate cancer.
- Dr Xin Li at Clark University Atlanta, who will be looking to reduce prostate cancer disparities via novel therapy which targets the protein Skp1, potentially inhibiting prostate cancer growth and spread.

Following our racial inequalities grant call in 2021, we now fund eight projects in this area totalling over £1 million funding commitment. This programme of work has been recognised by others in the charity sector, with the team invited to speak at the inaugural Black in Cancer conference and quoted in the APPG on medical research report on health disparities, demonstrating that innovative high-quality work can have impact beyond our own domain of focus by acting as an exemplar to others.

In total we are now funding 23 different streams of research, meeting our 2020 target. This was a very ambitious target, particularly given the bumps in the road we have experienced along the way with the Covid-19 pandemic and the cost of living crisis. Over the last five years we have funded £4.8 million of research and expect this figure to grow significantly in the next five years.

Not only have we expanded the scale of our research but also the kinds of research that we fund, recognising feedback from our patient population. As a result, we now fund a very broad and diverse portfolio of research including:

- **A wide range of therapeutic approaches**, with projects covering immunotherapy, radioligand therapy, hormone therapy, epigenetics, DNA damage repair and potential new therapeutic targets.
- **Diagnostic approaches**, recognising that earlier detection would significantly reduce the disease burden, while still searching for treatments for those whose disease is detected too late.
- **Social research**, recognising that the issues with prostate cancer are not only biological, and that the solutions will not only be found in research labs.
- **Computing based research**, recognising the enormous potential that data science and machine learning approaches can bring to some of the biggest challenges we face in prostate cancer such as the development of personalised medicine and better diagnosis.

This work takes place at 16 different universities and institutions, recognising the quality of research around the UK and beyond (including 4 projects in the US through our recently established US entity). We also support a mix of early-stage researchers and more established professors, recognising the difficulty that early-career researchers can have in securing independent funding for exciting and novel approaches.

PROSTATE CANCER RESEARCH TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2023

Highlights from ongoing projects include:

- We have previously identified the critical need for more research funding to be directed to the challenge of prostate cancer which has escaped from the confines of the prostate and invaded bone. A year into their project, Dr Jennifer Munkley and Dr Ning Wang, working in a cross-institutional partnership at Newcastle University and the University of Sheffield, have shown that two types of sugar found on the surface of prostate cancer cells (known as sialic acid and core fucose) help prostate cancer spread to and start growing in bones. The team are now testing potential drugs against these sugars.
- Dr Helen Pearson and Dr Toby Phesse at Cardiff University have shown very promising signs that another therapeutic strategy, targeted against a network of chemical reactions collectively called Wnt signalling, could significantly reduce growth of the tumour within the prostate, and that the same Wnt signalling has an important role to play in prostate cancer secondary tumours in bone.
- Professor Dan Brewer at the University of East Anglia, Professor David Wedge at the University of Manchester and Dr Daniel Woodcock at the University of Oxford have worked together to harness the potential of machine learning, and have developed a way to identify, at diagnosis, at least two aggressive subtypes of prostate cancer that may need to be treated in different ways. This has potential to bring much more certainty to clinicians about the best and likely most effective route to take to treat a newly diagnosed patient.
- Hormone therapy remains a mainstay of prostate cancer treatment, but it can stop working in many men. Professor Iain McEwan at the University of Aberdeen and his team have developed a palette of novel drugs designed to attack the androgen receptor in a different way, even when standard hormone therapies can no longer work. They have measured their new drugs' ability to switch off androgen receptor function at different concentrations and in different prostate cancer cell models, with encouraging early results. This highly innovative approach to prostate cancer treatment has the potential to significantly improve the outcome for men with advanced disease, who currently have very few options and for whom the outcome is bleak.

One project finished during the year with exciting results. In 2020, we awarded Dr Anna Wilkins and Dr Erik Sahai at The Crick Institute funding to develop and test software to predict which cancers will return after treatment. Anna and Erik have now successfully completed their project, which showed that their technology can identify patterns which mean a cancer is more likely to return. This marks a huge step forward for more personalised treatment. The researchers will now take their technology forward and prove that it can analyse a wide range of patient tissue, for example, by testing it using tissue from men who have more advanced prostate cancer. They also aim to continue to make improvements to make the software work even better.

Our latest grant call is ongoing, covering a range of potential topics including diagnosis, drug / therapy discovery and treatment, side effects, personalised medicine, basic science and target discovery, experiences of the healthcare system, and treatment adherence. 38 expressions of interest were received totalling £12 million of funding, our largest grant call yet. A shortlist of 16 projects is currently under review by our Scientific Advisory Committee and our Patient Panel – we look forward to updating you on our new projects next year.

It has been particularly encouraging for us to note two trends across our applications for this grant round, which we believe reflect the work we have done to influence the sector: researchers are taking greater steps to involve patients in their work in more meaningful and significant ways, and to ensure that their data sets are representative and inclusive of all people who can get prostate cancer.

PROSTATE CANCER RESEARCH TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2023

Translational Research Highlights

Our efforts in the translational research space have continued to grow during 2022 / 23 with our translational research arm, Proven Connect, becoming an established partner amongst the community of researchers, companies and investors working in the prostate cancer field.

We made our second investment in commercial research, supporting Newcastle-based biotech Nanoverly as part of their £1.85 million fundraise. Nanoverly has developed a nanorobot platform to detect chronic illnesses like prostate cancer, liver disease, and severe conditions such as acute liver and kidney toxicity. Alongside funding, we are also working with Nanoverly to develop much more reliable, simple, and accessible testing for prostate cancer. Our first investment, Lucida Medical, an AI software company helping radiologists find prostate cancer using MRI, has made encouraging progress during the year with its Pi software delivering exciting results from its 2,000 patient PAIR-1 clinical study.

We have continued to develop our relationship with Innovate UK, where we are now partners on two programmes, the Health Aging Challenge Programme (2021-23) and the new Future Economy Partnership Programme (2023-25). This provides aligned funding for early-stage companies, potentially matching the total amount raised from investors, and contributed a significant portion of Nanoverly's overall fundraise.

The scope of Proven Connect goes far beyond providing much needed funds to early-stage companies. Our Translational Scientific Advisory Committee has now worked with 13 early-stage companies providing valuable feedback regarding the potential to develop innovations for the benefit of prostate cancer patients. We have also partnered with the Lean Life Science Accelerator, the IQVIA Accelerator, and the AstraZeneca mentorship programme to provide valuable support for early-stage companies.

To ensure that the benefit of these efforts is felt beyond prostate cancer, we have brought together a group of medical research charities with the aim of establishing a new collaborative third sector Translational Research Network – “paving the way for health innovations to deliver impact for patients”.

Data was another area of focus for the translational research team, as summarised by our report “[Unlocking the potential of prostate cancer data](#)”. The report was inspired by patients, who told us that they would like to give appropriate access to their data so their experiences can better inform research in a way that respects their privacy, while academics, clinicians and companies all told us that lack of access to anonymised patient data and insights dramatically slows their research. Four workshops were held with key stakeholders, with participants agreeing that there is huge value in the analysis of real-world data alongside patient-entered data to generate insights in prostate cancer diagnosis and treatment.

On the back of this report, our translational research, patient project and fundraising teams have worked together to successfully develop and fund a data platform for prostate cancer patients to address these challenges. To date, over 3,000 patients have pledged their support to the platform which will provide consent to link to their clinical data, including patients from different backgrounds and those with low health literacy. We would like to express our thanks to IQVIA for their pro-bono support towards the initial development of the platform, to Bayer for their sponsorship of the feasibility study element of the project, and to Advanced Accelerator Applications (a Novartis Company) for their sponsorship of the platform in its first year.

PROSTATE CANCER RESEARCH TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2023

Patient Projects/EPPC (Empowering People with Prostate Cancer)

During recent years, we have substantially increased patient involvement in our work, with our Patient Panel reviewing all research applications and contributing to our strategy. However, we made significant advances in patient engagement during 2022/23 with a number of new initiatives delivered by our new patient projects team. This has been an important strategic transition for Prostate Cancer Research – in the past we have deployed funds to researchers who undertake the research on our behalf. With our patient projects team we are now delivering the work ourselves in a way that allows us to directly address the needs of our patient population and maximise our impact.

A significant portion of the year was focussed on the launch of the infopool, a new interactive patient information website that will ensure that prostate cancer patients have access to clearer, more accessible health information. To deliver this project, we created a whole new patient projects department, hiring a Clinical Nurse Specialist, Health Information Executive, Programme Manager, and Communities & Communications Executive. This was made possible thanks to generous funding from The National Lottery Community Fund.

The infopool was launched in April 2023, with over 500 written stories and more than 150 videos from patients on their experience of treatment and care, providing insights from the lived experience of other patients who are sharing their stories in a way that is both culturally appropriate and accessible for those with low health literacy. The infopool has been endorsed by BAUN (the British Association of Urological Nurses) and achieved the Patient Information Forum's PIF TICK accreditation, a major achievement and demonstration of a high standard for all PCR's health information and processes. The PIF TICK is the UK's independently assessed quality mark for trusted health information.

In Summer 2022 we launched our "What to Expect: A Guide to Prostate Cancer" webinar series. Every Wednesday for eight weeks in June and July 2022, Prostate Cancer Research hosted interactive webinars for anyone affected by prostate cancer, including patients, family members, caregivers, or anyone who might benefit from learning more about prostate cancer and its effects. We have had over 5,000 views of this webinar series since it was launched which was made possible thanks to a generous donation from Ipsen.

We have also begun our "Conversations" research project in which we surveyed 766 men and held 4 focus groups with over 30 participants. The survey explored the issues such as conversations between patients and healthcare professionals around diagnosis, conversations around treatment options and side effects, information provision, shared decision making and support from healthcare professionals. In doing so, we considered a diverse range of experiences noting differences based on culture, ethnicity, religion, gender and sexual orientation. On the back of this work, we have developed a series of activities and resources to try to help overcome some the problems identified. We would like to thank Advanced Accelerator Applications (a Novartis Company) for their educational grant in support of the research phase of this project.

Team highlights

As the charity continues to evolve, so too does our team. We welcomed Louisa Fleur to our Board of Trustees. Louisa is lead Uro-Oncology Clinical Nurse specialist at Guys and St Thomas's and was previously BAUN Urology Nurse of the Year. Louisa is already making an impact at PCR, most notably with the infopool, and we are excited to see her contributions to the organisation in the years ahead.

After 10 years as a Trustee, Michelle Hunter retired her position. Michelle has made significant contributions to PCR during that time, thanks to her extensive experience of charity fundraising and governance, and we shall miss her involvement. We would also like to thank other team members who left during the year, including Denise Karikari, our Research Manager who helped deliver successful grant calls and oversee our growing portfolio of research projects, and Amy Russell and Eurydice Dupre, who helped us raise millions through Events and Community Fundraising, including during the pandemic.

PROSTATE CANCER RESEARCH TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2023

Progress Against Our 2020-23 Strategy

At the beginning of 2020 we set out on an ambitious 3-year strategy, with 6 key objectives. As we enter the final year of that period, we wanted to reflect on our progress against that strategy:

1. Gold standard for prostate cancer research – During this period PCR set out to become the gold standard for research into prostate cancer. We committed to being at the forefront of innovation and fostering scientific excellence by actively pursuing exceptional science proposed by outstanding scientists.

We currently fund 23 different research projects at 16 different universities and institutions around the UK and US covering a wide range of diagnostics and therapeutic approaches, as well as funding and supporting a growing portfolio of translational research.

2. Leveraging Partnerships - Looking out for and nurturing vibrant partnerships is part of the solution to speeding up the development of pioneering treatments for cancer patients in the UK and worldwide. During this period PCR wanted to build bridges between the scientific community, government, pharmaceutical industry and people with prostate cancer.

We have built effective partnerships with other research organisations, charities and patient groups in the UK and US. These partnerships reduce costs and maximise our collective impact. We have also built strong links with leading prostate cancer focussed pharma companies, as well as early-stage biotechs looking to develop the next generation of treatments and diagnostics. We have also developed relationships with various Government bodies as we look to ensure the benefits of research reach patients.

3. Learning and Connecting - We wanted to foster a culture of continuous learning and to build a 'shared' sense of purpose and the autonomy to achieve goals. Capturing and preserving knowledge is critical to PCR's organisational effectiveness and long-term success. Our ultimate objective is to establish a stronger connection between our scientists, the people we are serving and ourselves.

We have significantly expanded our patient engagement with an active community of over 3,000 patients. 'What matters to patients matters to us' is now at the heart of the organisation and this approach guides our research, information, funding and communication strategies. We have also retained and developed our senior management team during this period, ensuring a deep understanding of prostate cancer within the organisation.

4. Positioning PCR as a thought leader - To succeed in our mission, we wanted to further strengthen our credibility and reputation. It is not enough to do great work. We wanted to demonstrate our impact alongside a strong and compelling brand that would help us amplify the value we offer.

During the period we have successfully rebranded the organisation and significantly amplified our voice through a range of media engagements, campaigns, conferences, and patient activities. In conjunction with our expanded portfolio of research, we believe that PCR is now recognised as a leading authority on prostate cancer research among the research community, decision-makers and funders.

5. Strengthening internal structure and processes through assembling experts- The impartiality and rigor of our processes are paramount in deciding on which are the correct programmes that will advance scientific understanding and the development of prostate cancer research. We wanted to assemble experts to advise us on all aspects of running a successful and robust research charity.

During the period we have significantly expanded the depth and breadth of input that we receive from external sources, including through the creation of new committees covering translational research, clinical expertise and patient input. We have also improved internal governance and organisational processes, delivering three successful grant calls.

6. Sustainable growth - To achieve sustainable growth, we must diversify our income streams and increase our unrestricted funding capacity to fulfil the scale-up in commitments we are making. Only in this way can we fulfil our commitment to broadening our research.

We have successfully grown the organisation, with income of over £3 million in 2022/23, more than 30% higher than 2019/20 despite headwinds of the Covid-19 pandemic and the cost-of-living crisis. This has been achieved through a dual approach of bidding for larger grants from government, trusts and corporates, while also strategically investing in fundraising to ensure we build up the type of flexible funding that comes from events, individual giving and legacies.

PROSTATE CANCER RESEARCH

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2023

Financial review

Income

2022/23 was another record financial year for Prostate Cancer Research, delivering fundraising income of £3.0 million, an increase of over 12% on 2021/22 (our previous record year). This is particularly impressive given turbulence in financial markets and that the UK spent much of the year in a cost-of-living crisis which has impacted multiple revenue streams including individual giving and events, offset by strong growth in Corporate fundraising.

In 2022/23, we raised over £900k from 35 funders through our Trusts & Statutory fundraising with several key achievements. For example, over £658,000 has been awarded by the UKRI (BEIS/DHSC) as part of the UK Govt. COVID Medical Research Charity Support Fund to support Early Career Researchers funded through PCR's academic research grants. Additionally, PCR has been delighted to receive ongoing grant payments from The National Lottery Community Fund, totalling over £150k, to support the development and delivery of our new patient information and education tool, the infopool. We were also pleased to continue to secure significant restricted income from several Trusts & Foundations for our new research projects, including a grant of £20,000 from the Robert Barr Charitable Trust and a grant of £10,000 from the Cadogan Charity towards a project led by Dr Kirsteen Campbell at the University of Glasgow.

We have also made real progress in the development and growth of our industry partnerships with pharmaceutical companies which has driven corporate fundraising. As an income stream, Corporate fundraising has grown from £20k in 2021/22 to over £260k in 2022/23. This has primarily been driven by PCR's work to improve prostate cancer patient involvement and education, which has garnered support from pharmaceutical companies through activities such as sponsorship of PCR's new data platform for prostate cancer patients, educational grants to enable research into the lived experiences of patients, and collaborative projects focused on patient education.

Our events team raised over £650k in the year, with major contributions from the London Marathon and our own Snowdon for Science event. Despite the difficult financial climate, we also generated over £300k from individual giving and would like to thank all of our regular donors and events participants who made it possible for us to raise almost £1 million between these two income streams. Income from Legacies increased 35% to over £740k and this remains a very important source of income for PCR.

Expenditure

The overall increase in income allowed us to increase our expenditure on charitable activities, which grew from £1.7 million last year to £2.4 million this year reflecting a full year of the new research projects that started in 2021/22, the new research projects that started this year, and our patient project activities. Costs of raising funds increased from £0.9 million to £1.0 million as we have invested in new positions to build the Fundraising team, with a focus on tailored stewardship.

In aggregate, 70% our expenditure went on charitable activities, an improvement on 66% in 2021/22. We have made significant investments in recent years in new initiatives such as translational research, greater patient engagement and a presence in the US. As these new initiatives become self-sustaining over the next couple of years, we will continue move towards our target of 80% of expenditure on charitable activities in line with more mature charities.

Reserves

The charity ended the year with an annual deficit of £0.5 million, in line with our budget for the year. As a result, reserves of the charity have decreased slightly to £2.7 million, comprising £0.3m of restricted reserves, £2.2 million of designated funds and £0.2 million of general funds. We also expect to have a budget deficit in 2023/24 as our research activities expand further, but plan to return to a surplus in 2024/25 because of the new initiatives in which we have invested in recent years.

The charity operates a policy of retaining sufficient funding to cover at least 12 months future commitments which the Trustees consider prudent in light of the charity making long-term grant commitments. Due to the significant increase in research funding alongside the 2022/23 deficit, we are not currently compliant with this policy, with designated funds of £1.2 million (being 9 months of grant commitments) and restricted funds of £0.1 million held against 12 month grant commitments of £1.5 million. Several long-term research commitments will come to an end in the next 18 months which, in conjunction with expected income growth, will allow us to return to compliance with this policy.

PROSTATE CANCER RESEARCH TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2023

Structure, governance and management

The charity was founded as the Covent Garden Cancer Research Trust, Charity Commission number 802545. A third deed of amendment changed the name to the Prostate Cancer Research Centre in September 2004. To better reflect the expanded scope of the charity's work, the working name was subsequently changed to Prostate Cancer Research (Charity Commission number 1156027) in October 2020. Prostate Cancer Research (the 'charity') is a Charitable Incorporated Organisation (CIO). The charity raises funds to continue the aims of the charitable mission, to promote medical and scientific research into the causes and treatment of cancer.

New trustees are appointed by the existing trustees and serve for variable periods. Once appointed they are inducted through a range of meetings with staff and scientists. An organisational assessment is completed periodically to highlight areas where training will be implemented. The Trust deed provides for a minimum of 2 trustees to make a quorum and up to a maximum of 15 trustees. All trustees give of their time freely and no Trustee remuneration was paid in the year.

Four trustees' meetings are held in the year, at which the trustees consider strategy, grant making, reserves, risk management, finance, governance, performance and fundraising direction. The charity has a Fundraising sub-committee, and Finance, Audit & Risk sub-committee, which meet once per quarter and update the full board at the following meeting. The day-to-day administration of the Charity, including setting the salary of the executive staff, is delegated to the Chief Executive, Oliver Kemp. The trustees set the salary of the Chief Executive.

How the organisation delivers public benefit

From 1 April 2008 the Charities Act 2006 requires all charities to meet the legal requirement that its aims are for the public benefit. The Charity Commission in its "Charities and Public Benefit" guidance requires that there are two key principles to be met in order to show that an organisation's aims are for the public benefit: first, there must be an identifiable benefit and secondly the benefit must be to the public or a section of the public.

The Board of Trustees confirm they have regard to the Charity Commission's guidance on public benefit and consider each year how it meets the public benefit objectives outlined in Section 17 (5) of the Charities Act 2011. They are satisfied that Prostate Cancer Research meets the requirements and conforms to the Act's definition of a charity meeting all elements of the two key principles.

The public benefits of the Charity's work are the acquisition of knowledge that will lead to improvement of the survival and/or quality of life of men with prostate cancer or lead to the development of novel therapies and diagnostics. In addition, the Charity trains and educates future prostate cancer research scientists and clinicians, disseminates its research findings and provides a information for men with prostate cancer and their families.

Grant making policy

The Charity's grant-making policy allows it to achieve its object of funding research to improve the survival of men with prostate cancer. Prostate cancer can be cured while it is localized to the prostate, but once it has spread outside the prostate it is difficult to cure.

Improvements in therapies have been developed in the past decade, but one man still dies of prostate cancer every 45 minutes in the UK, and 250,000 men die each year from prostate cancer world-wide. Innovative thinking and new approaches are required to solve this problem, and existing treatments need to be applied more effectively. We are proud to work with leading scientists with a shared aim of reducing morbidity, increasing survival rates and improving quality of life for men with prostate cancer. We are committed to funding the gaps we see in the research ecosystem and there is an urgent need to develop new effective treatments for men with prostate cancer, particularly advanced prostate cancer, and to carry out the underpinning research to achieve this.

PROSTATE CANCER RESEARCH TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2023

The beneficiaries of the grant-making programme are ultimately those affected by prostate cancer and those at risk of developing prostate cancer. Prostate cancer is the most frequently diagnosed cancer in men, with UK figures of over 50,000 new cases diagnosed and over 12,000 deaths due to the disease every year.

The Charity follows guidelines and principles set down by the Association of Medical Research Charities (AMRC). The Charity became a member of the AMRC in 2016. The AMRC guidelines for peer review are followed by the charity. For example, grants with a cost in excess of £50,000 per annum and/or with a duration of longer than one year are externally peer-reviewed by UK and foreign scientists of international standing with relevant expertise in the field of the grant proposal. A summary is produced by the Chairman of the Scientific Committee for submission to the trustees, together with the original reports where required. Reports are submitted to the trustees on completion for grants of one year or less, and annually for grants of longer than one year.

Dissemination of research

For research to benefit patients, it is necessary that the output is published in high impact journals that are read by scientists and doctors researching into and treating prostate cancer. We also speak at conferences, to other industry professionals and to relevant newspapers and other media.

Monitoring impact

We assess all our work under a range of outputs and outcomes throughout the year and at an annual review meeting. The outputs include number of publications, collaborations and other funding secured. The science is also monitored against the milestones set by the scientists and the SAC and benchmarked against sector averages. Our long-term impact is to reduce the number of people dying or suffering from prostate cancer and all our work is ultimately judged by these criteria.

Fundraising

The organisation has set out on an ambitious fundraising strategy to increase income of the charity. Our approach is to raise funds using professional internal staff and not commercial outsourcing agencies. We broadened the number of major income streams from 5 to 7 by adding in major donor and corporate funding. This makes the organisation more sustainable and allows us to fund the expansion in our research projects over the next few years.

We subscribe to FRSB and we are members of the Institute of Fundraising. We had no incidents of any member of staff or anyone acting on our behalf breaking any fundraising standard or regulation. We did not receive a single complaint about our fundraising methods during the course of the year. We only request money from our members and donors twice per annum in order to ensure we do not put undue pressure on them to donate.

Volunteers

Our trustees, scientific advisors for both translational and academic research, dozens of patient panellists and peer reviewers all volunteer their time to help the organisation make better decisions about which grants to award.

Volunteers also help in challenge events by registering participants, marshalling, manning cheer stations and photographing the event.

We also have a Clinical Advisory Group and Patient Advisory Group that advise the executive on specific issues according to their skill set.

Our Treasurer works half a day a week on a voluntary basis.

PROSTATE CANCER RESEARCH TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2023

Risk Management

The trustees have considered the major risks to which the charity is exposed. The risk report assesses the "gross" risk (GR) at the beginning of the year, calculated as likelihood (L) x impact (I) before controls (i.e. if no action were taken) and the "net" risk (NR), after taking account of control procedures in place.

Key risks include

Fundraising risks such as the impact of the cost of living crisis on events and community fundraising. The impact of Covid-19 was felt significantly in recent years, and mitigating actions have been taken to protect our long-term financial health. We have a number of large grants coming to an end over the next 18 months and we will continue to manage the number of new grants we authorise carefully as well as continuing our diversification of fundraising efforts.

Financial risks such as a bank or stock market crash, which in turn could restrict our ability to fulfil grant commitments to funded researchers. This is mitigated through our Finance, Audit and Risk committee, which is formed of finance professionals, and is responsible for deciding the balance between cash and equities, and for advising on investments. Currently, our reserves are all held in cash and savings accounts and we also spread our investments over a number of banks to take advantage of the £85,000 government guarantee.

Because the trustees commit to grants, the charity has a reserves policy which requires the charity to hold several months of research funding in reserve which aims to allow the scientists the time to find alternative funding if we were to phase out of a grant due to a sudden financial event or decline in fundraising. Grants are made subject to funding being available. In the event of no further funds being available, the trustees could run down their commitments in an orderly fashion. By adhering to this policy, the trustees would be able to give 6 months or more notice of the termination of any grant. Free reserves are retained in order to ensure the charity could honour legal obligations to staff and suppliers.

Trustees regularly assess and monitor the overall financial condition of PCR. They require the preparation by management of forward financial scenarios, which are subjected to risk and stress testing. Trustees believe they are able to identify, at an early stage, the potential for future financial difficulties.

Scientific risks such as when grants are given for a research project, the charity is not in direct control over how the money is spent. Should the money be used for some other purpose, the Charity would not be able to fulfil its mission and there is a possibility of adverse publicity. In addition, the research that we fund may not deliver tangible benefits. To mitigate this PCR gives grants to recognised centres of research excellence that have fully audited procedures to monitor impact and prevent the misuse of funds. Our process for selecting research has multiple different layers including both internal and external experts to ensure integrity of selection and compliance with our conflict of interest policy. The Treasurer monitors all claims on grants and queries unusual claims. Updates are provided by the Chairman of the Scientific Committee at each trustee meeting and the scientists produce an annual report for each project which is evaluated independently.

Governance risks such as sudden loss of any key individuals such as Chair, Treasurer, CEO, key fundraising staff, chair of SAC. This is mitigated by the staff motivation strategy, devising succession plans for key positions and establishing who could take over key roles on interim basis.

Data and IT risks, such as unauthorised access to our IT systems and release of sensitive data about the organisation, our donors or the patients that we engage with this. To address this risk, we follow IT best practices and have conducted penetration testing of our IT systems in relation to the launch of the infopool.

**PROSTATE CANCER RESEARCH
TRUSTEES' REPORT
FOR THE YEAR ENDED 31 MARCH 2023**

Statement of trustees' responsibilities

The trustees are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice), including FRS 102, the Financial Reporting Standard applicable in the UK and Republic of Ireland.

Charity law requires the trustees to prepare financial statements for each financial year. Under that law the trustees have elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under charity law the trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charity and the results of the charity for that period.

In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP (Statement of Recommended Practice);
- make judgments and accounting estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business.

The trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the charity's transactions and disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that the financial statements comply with the Charities Act 2011. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Insofar as the trustees are aware:

- there is no relevant audit information of which the charity's auditor is unaware; and
- the trustees have taken all steps they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

The maintenance and integrity of the charity's website is the responsibility of the trustees. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislations in other jurisdictions.



**Matthew Ellis
Chair of Trustees**

Date 10/07/2023

INDEPENDENT AUDITOR'S REPORT TO THE TRUSTEES OF PROSTATE CANCER RESEARCH

Opinion

We have audited the financial statements of Prostate Cancer Research for the year ended 31 March 2023 which comprise the Statement of Financial Activities, Balance Sheet, Statement of Cashflows and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charity's affairs as at 31 March 2023 and of its incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Charities Act 2011.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charity in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the trustee's use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charity's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the trustees with respect to going concern are described in the relevant sections of this report.



INDEPENDENT AUDITOR'S REPORT TO THE TRUSTEES OF PROSTATE CANCER RESEARCH

Other information

The trustees are responsible for the other information contained within the annual report. The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters in relation to which the Charities (Accounts and Reports) Regulations 2008 require us to report to you if, in our opinion:

- the information given in the financial statements is inconsistent in any material respect with the trustees' report; or
- sufficient accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records and returns; or
- we have not received all the information and explanations we require for our audit

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement set out on page 12, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charity or to cease operations, or have no realistic alternative but to do so.

INDEPENDENT AUDITOR'S REPORT TO THE TRUSTEES OF PROSTATE CANCER RESEARCH

Auditor's responsibilities for the audit of the financial statements

We have been appointed as auditor under section 144 of the Charities Act 2011 and report in accordance with the Act and relevant regulations made or having effect thereunder.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

Extent to which the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We identified and assessed the risks of material misstatement of the financial statements from irregularities, whether due to fraud or error, and discussed these between our audit team members. We then designed and performed audit procedures responsive to those risks, including obtaining audit evidence sufficient and appropriate to provide a basis for our opinion.

We obtained an understanding of the legal and regulatory frameworks within which the charity operates, focusing on those laws and regulations that have a direct effect on the determination of material amounts and disclosures in the financial statements. The laws and regulations we considered in this context were the Charities Act 2011 together with the Charities SORP (FRS 102). We assessed the required compliance with these laws and regulations as part of our audit procedures on the related financial statement items.

In addition, we considered provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which might be fundamental to the charity's ability to operate or to avoid a material penalty. We also considered the opportunities and incentives that may exist within the charity for fraud. The laws and regulations we considered in this context were Charity Commission regulations, taxation, employment law and General Data Protection Regulation (GDPR).

Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any.

We identified the greatest risk of material impact on the financial statements from irregularities, including fraud, to be within the recognition of income, and the override of controls by management. Our audit procedures to respond to these risks included enquiries of management and the Finance, Audit & Risk Committee about their own identification and assessment of the risks of irregularities, sample testing on the posting of journals, sample testing of documentation relating to income, reviewing accounting estimates for biases, reviewing regulatory correspondence with the Charity Commission, and reading minutes of meetings of those charged with governance.



INDEPENDENT AUDITOR'S REPORT TO THE TRUSTEES OF PROSTATE CANCER RESEARCH

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations (irregularities) is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it. In addition, as with any audit, there remained a higher risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. We are not responsible for preventing non-compliance and cannot be expected to detect non-compliance with all laws and regulations.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

This report is made solely to the charity's trustees, as a body, in accordance with Part 4 of the Charities (Accounts and Reports) Regulations 2008. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

A handwritten signature in dark ink that reads "Alastair Lyon".

Alastair Lyon

Senior Statutory Auditor

For and on behalf of

Crowe U.K. LLP

Statutory Auditor

Reading

Date: 25 July 2023

Crowe U.K. LLP is eligible for appointment as auditor of the charity by virtue of its eligibility for appointment as auditor of a company under section 1212 of the Companies Act 2006.

**PROSTATE CANCER RESEARCH
STATEMENT OF FINANCIAL ACTIVITIES
FOR THE YEAR ENDED 31 MARCH 2023**

	Notes	Unrestricted funds £	Restricted funds £	Total funds 2023 £	Total funds 2022 £
Income and endowments from:					
Donations and legacies	3	1,822,685	1,164,925	2,987,610	2,660,859
Investments	4	13,336	-	13,336	14,962
Other income		<u>1,854</u>	<u>-</u>	<u>1,854</u>	<u>-</u>
Total income		<u>1,837,875</u>	<u>1,164,925</u>	<u>3,002,800</u>	<u>2,675,821</u>
Expenditure on:					
Raising funds	5	1,049,831	-	1,049,831	879,060
Charitable activities	6	<u>1,554,435</u>	<u>850,547</u>	<u>2,404,982</u>	<u>1,743,661</u>
Total expenditure		<u>2,604,266</u>	<u>850,547</u>	<u>3,454,813</u>	<u>2,622,721</u>
Net movement in funds		<u>(766,391)</u>	<u>314,378</u>	<u>(452,013)</u>	<u>53,100</u>
Transfer of funds		107,887	(107,887)	-	-
Fund balances brought forward at 31 March 2022		<u>3,068,438</u>	<u>107,887</u>	<u>3,176,325</u>	<u>3,123,225</u>
Fund balances carried forward at 31 March 2023		<u>2,409,934</u>	<u>314,378</u>	<u>2,724,312</u>	<u>3,176,325</u>

All the above results were derived from continuing activities.

The notes on pages 20 to 34 form part of these financial statements.

PROSTATE CANCER RESEARCH
REGISTERED NUMBER: 1156027
BALANCE SHEET
31 MARCH 2023

	Notes	2023 £	2022 £
FIXED ASSETS			
Property and equipment	10	922,525	943,021
Fixed term deposits		-	-
		922,525	943,021
CURRENT ASSETS			
Debtors	11	976,313	452,574
Fixed term deposits		-	515,000
Cash at bank and in hand	12	1,610,178	1,653,379
		2,586,491	2,620,953
CREDITORS: Amounts due within one year	13	(784,704)	(387,649)
NET CURRENT ASSETS		1,801,787	2,251,177
CREDITORS: Amounts due after one year		-	-
NET ASSETS		2,724,312	3,176,325
FUNDS OF THE CHARITY			
RESTRICTED		314,378	107,887
UNRESTRICTED			
Designated funds			
- Property		922,525	943,021
- Support and working capital		119,361	116,924
- Grants		1,167,545	1,664,729
General funds		200,503	343,764
TOTAL FUNDS	15	2,724,312	3,176,325

The financial statements were approved and authorised for issue by the Board and were signed on its behalf by:



Matthew Ellis
Trustee

Date: 10/07/2023

The notes on pages 20 to 34 form part of these financial statements.

**PROSTATE CANCER RESEARCH
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 MARCH 2023**

		2023 £	2022 £
Cash flows from operating activities:			
Net cash provided by operating activities	(a)	<u>(571,537)</u>	<u>(36,244)</u>
Cash flows from investing activities:			
Dividends, interest and rents from investments		13,336	14,962
Proceeds from sale of investments		1,975	1,931
Management fees for short term deposits		<u>(1,975)</u>	<u>(1,931)</u>
Net cash from investing activities		<u>13,336</u>	<u>14,962</u>
Change in cash and cash equivalents in the reporting period		<u>(558,201)</u>	<u>(21,282)</u>
Cash and cash equivalents at the beginning of the reporting period		<u>2,168,379</u>	<u>2,189,661</u>
Cash and cash equivalents at the end of the reporting period		<u><u>1,610,178</u></u>	<u><u>2,168,379</u></u>
Where cash and cash equivalents consists of:			
Cash at bank and in hand	12	823,536	1,045,808
Fixed term deposits (current and non-current)		<u>786,642</u>	<u>1,122,571</u>
Cash and cash equivalents		<u><u>1,610,178</u></u>	<u><u>2,168,379</u></u>
(a) Reconciliation of net expenditure to net cash flows from operating activities			
Net income for the reporting period		(452,013)	53,100
Adjustment for:			
Depreciation charge		20,496	20,496
Dividends and interest from investments		(13,336)	(14,962)
(Increase)/ Decrease in debtors		(523,739)	(100,384)
Increase/(Decrease) in creditors		<u>397,055</u>	<u>5,506</u>
Net cash provided by/ (used in) by operating activities		<u><u>(571,537)</u></u>	<u><u>(36,244)</u></u>

The notes on pages 20 to 34 form part of these financial statements

**PROSTATE CANCER RESEARCH
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

1 CHARITY INFORMATION

Prostate Cancer Research is a Charitable Incorporated Organisation (CIO) registered in the UK (charity number 1156027) with its registered office at Suite 2, 23-24 Great James Street, London, WC1N 3ES. Prostate Cancer Research registered as a CIO on 5 March 2014, with a deed of amendment filed on 15 July 2014.

2 ACCOUNTING POLICIES

2.1 Basis of preparation

The financial statements have been prepared under the historical cost convention, as modified by the revaluation of fixed asset investments, and in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019) (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) and the Charities Act 2011.

Prostate Cancer Research meets the definition of a public benefit entity under FRS102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

2.2 Going Concern

The charity has cash resources and has no requirement for external funding. There are no material uncertainties about the charity's ability to continue. The trustees have a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. They continue to believe the going concern basis of accounting appropriate in preparing the annual financial statements.

2.3 Fund accounting policy

Unrestricted income funds are general funds that are available for use at the Trustees' discretion in furtherance of the objectives of the charity.

Restricted funds are those donated for use in a particular area or for specific purposes, the use of which is restricted to that area or purpose.

Designated funds are unrestricted funds set aside at the discretion of the Trustees for specific purposes.

Further details of each fund are disclosed in note 16.

2.4 Income

Voluntary income including donations, legacies and grants that provide core funding or are of a general nature is recognised where there is entitlement, certainty of receipt and the amount can be measured with sufficient reliability. In the event that a donation is subject to conditions that require a level of performance before the charity is entitled to the funds, the income is deferred and not recognised until either those conditions are fully met, or the fulfilment of those conditions is wholly within the control of the charity and it is probable that those conditions will be fulfilled in the reporting period.

**PROSTATE CANCER RESEARCH
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

2.4 Income (continued)

Investment income is recognised on a receivable basis.

For the financial year 2018/19 onwards our legacy income will be recognised in the Statement of Financial Activities (SOFA) when a transaction or other event results in an increase in the charity's assets or a reduction in its liabilities.

Legacy income must only be recognised in the accounts of a charity when all of the following criteria are met:

1. Entitlement – control over the rights or other access to the economic benefit has passed to the charity.
2. Probable – it is more likely than not that the economic benefits associated with the transaction or gift will flow to the charity.
3. Measurement – the monetary value or amount of the income can be measured reliably and the costs incurred for the transaction and the costs to complete the transaction can be measured reliably.

As the income received could fluctuate by the time it is realised we will include only 80% of the funds we are notified of in that financial year. As and when the income arrives any additional income will be accounted for in the financial year it arrives in.

2.5 Expenditure

Liabilities are recognised as soon as there is a legal or constructive obligation committing the Charity to the expenditure. All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category.

Costs of generating funds are the costs of trading for fundraising purposes.

Charitable expenditure comprises those costs incurred by the Charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them.

Grants payable are payments made to third parties in the furtherance of the charitable objectives. Where the Charity gives a grant with conditions for its payment being a specific level of service or output to be provided, such grants are only recognised in the Statement of Financial Activities once the recipient of the grant has provided the specific service or output.

Grants payable without performance conditions are only recognised in the accounts when a commitment has been made and there are no conditions to be met relating to the grant which remain in the control of the Charity.

Provisions for grants are made when the intention to make a grant has been communicated to the recipient but there is uncertainty about either the timing of the grant or the amount of grant payable.

**PROSTATE CANCER RESEARCH
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

2.6 Fixed assets

Individual fixed assets costing £5,000 or more are initially recorded at cost.

2.7 Depreciation

Depreciation is provided on tangible fixed assets so as to write off the cost or valuation, less any estimated residual value, over their expected useful economic life as follows:

- Long Leasehold Property - 50 years
- Office Equipment - 50% on cost

2.8 Investments

Investments are a form of basic financial instrument and are initially recognised at their transaction value and subsequently measured at their fair value as at the balance sheet date using their closing quoted market price. Realised and unrealised gains and losses are shown in the statement of financial activities together as net gains on revaluation and disposals of investment assets. Investments held in the cash liquidity funds are classified within current assets.

The charity does not acquire put options, derivatives or other complex financial instruments.

2.9 Gains/losses on investment assets

All gains and losses are taken to the Statement of Financial Activities as they arise. Unrealised gains and losses on investment assets represent the difference between their fair value at the end of the year and their fair value at the beginning of the year, or transaction value if acquired during the year. Realised gains and losses on disposal of investment assets represent the difference between the sale proceeds and the fair value at the beginning of the year, or transaction value if acquired during the year.

2.10 Financial instruments

The charity only has financial assets and liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

2.11 Debtors

Debtors are recognised initially at fair value. Subsequent to initial recognition they are measured at amortised cost using the effective interest method, less any impairment losses.

2.12 Creditors

Creditors are recognised initially at fair value. Subsequent to initial recognition they are measured at amortised cost using the effective interest method.

2.13 Cash at bank and in hand

Cash at bank and in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

**PROSTATE CANCER RESEARCH
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

2.14 Operating leases

Rents payable under operating leases are charged to the Statement of Financial Activities on a straight line basis over the lease term.

2.15 Judgements and key sources of estimation uncertainty

There are no significant judgements in relation to the above accounting policies that have a material impact on the financial statements

3. Donations and Legacies – Current year

	Unrestricted Funds £	Restricted Funds £	Total 2023 £
Donations, fundraising and legacies			
Committed giving	1,082,077	1,164,925	2,247,002
Legacies and bequests	<u>740,608</u>	<u>-</u>	<u>740,608</u>
	<u>1,822,685</u>	<u>1,164,925</u>	<u>2,987,610</u>

Donations and Legacies – Comparative

	<i>Unrestricted Funds £</i>	<i>Restricted Funds £</i>	<i>Total 2022 £</i>
<i>Donations, fundraising and legacies</i>			
<i>Committed giving</i>	1,644,843	468,125	2,112,968
<i>Legacies and bequests</i>	<u>547,891</u>	<u>-</u>	<u>547,891</u>
	<u><i>2,192,734</i></u>	<u><i>468,125</i></u>	<u><i>2,660,859</i></u>

4. Income from investments – Current year

	Unrestricted Funds £	Restricted Funds £	Total 2023 £
Interest on cash deposits	<u>13,336</u>	<u>-</u>	<u>13,336</u>
	<u>13,336</u>	<u>-</u>	<u>13,336</u>

Income from investments – Comparative

	<i>Unrestricted Funds £</i>	<i>Restricted Funds £</i>	<i>Total 2022 £</i>
<i>Interest on cash deposits</i>	<u>14,962</u>	<u>-</u>	<u>14,962</u>
	<u><i>14,962</i></u>	<u><i>-</i></u>	<u><i>14,962</i></u>

**PROSTATE CANCER RESEARCH
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

5. Expenditure on raising funds – Current year

	Unrestricted Funds £	Restricted Funds £	Total 2023 £
Fundraising costs	446,146	-	446,146
Employment costs (see note 9)	<u>603,685</u>	<u>-</u>	<u>603,685</u>
	<u>1,049,831</u>	<u>-</u>	<u>1,049,831</u>

Expenditure on raising funds – Comparative

	<i>Unrestricted Funds £</i>	<i>Restricted Funds £</i>	<i>Total 2022 £</i>
<i>Fundraising costs</i>	435,770	-	435,770
<i>Employment costs (see note 9)</i>	<u>443,290</u>	<u>-</u>	<u>443,290</u>
	<u>879,060</u>	<u>-</u>	<u>879,060</u>

6. Charitable activities – Current year

	Unrestricted Funds £	Restricted Funds £	Total 2023 £
Grant funding of activities (see note 8)	622,851	850,547	1,473,398
Employment costs (see note 9)	536,609	-	536,609
Project Management/EPPC	157,137	-	157,137
Support costs (see note 7)	<u>237,838</u>	<u>-</u>	<u>237,838</u>
Total expenditure on charitable activities	<u>1,554,435</u>	<u>850,547</u>	<u>2,404,982</u>

Charitable activities - Comparative

	<i>Unrestricted Funds £</i>	<i>Restricted Funds £</i>	<i>Total 2022 £</i>
<i>Grant funding of activities (see note 8)</i>	797,918	360,238	1,158,156
<i>Employment costs (see note 9)</i>	394,036	-	394,036
<i>Project Management/EPPC</i>	18,796	-	18,796
<i>Support costs (see note 7)</i>	<u>172,673</u>	<u>-</u>	<u>172,673</u>
<i>Total expenditure on charitable activities</i>	<u>1,383,423</u>	<u>360,238</u>	<u>1,743,661</u>

**PROSTATE CANCER RESEARCH
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

7. Support costs are allocated on the basis of staff time and comprising the following:

	2023	2022
	£	£
Other stationery and postage	10,666	2,576
Communication expenses	50,936	32,179
Booklets	20,374	11,681
Office rent	17,371	6,146
IT, phone and internet costs	48,006	39,199
Recruitment	741	711
Bank charges	4,277	4,417
Memberships	15,527	9,276
Sundry and office maintenance	12,056	11,288
Depreciation	20,496	20,496
Governance costs		
Auditor's remuneration:		
current year	19,988	14,874
Trustee meeting expenses	-	-
Legal and professional fees	17,400	19,830
Total	<u>237,838</u>	<u>172,673</u>

8. Grant funding activities

Name of institution	Research Grants	Total 2023	Total 2022
		£	£
King's College London	Immunotherapy	4,292	137,342
	PlexinB1	126,858	133,871
	Wnt Signalling	-	79,570
Cardiff University	Bone mets/Targeting Wnt		
	Signalling	148,432	52,397
Cambridge University	PTEN and TSGs	144,117	86,431
	ProCASP	47,935	48,784
Aberdeen University	SoloMERS	98,169	121,984
Francis Crick institute	Machine learning models	51,220	39,808
Oxford University	177Lu-PSMA	117,012	113,232
Newcastle University	AR-V Splicing	77,582	111,523
	Glycan drugs targeting bone metastasis	134,179	43,880
University of East Anglia	AI/Mathematical Classification	115,699	69,912
UCL	STAMPEDE	90,921	12,152
Cancer Research UK	Targeting MCL-1	52,350	22,183
Imperial College London	Obesity and Prostate Cancer	145,882	33,743
University of Sunderland	Disparities/Barriers to early diagnosis	31,056	-
University of Essex	Disparities/AR risk	21,683	-
Other Grants costs	Research grants	66,011	51,344
		<u>1,473,398</u>	<u>1,158,156</u>

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9. Employees' remuneration

The average number of persons employed by the charity during the year, analysed by category was as follows:

	2023	<i>2022</i>
Charitable activities	10	<i>8</i>
Fundraising and marketing	<u>14</u>	<u><i>9</i></u>
Total	<u><u>24</u></u>	<u><u><i>17</i></u></u>

The aggregate payroll costs of these persons were as follows:

	2023	<i>2022</i>
	£	<i>£</i>
Salaries and wages	972,355	<i>729,949</i>
Pensions	34,392	<i>25,474</i>
National Insurance	105,058	<i>67,607</i>
Training and recruitment	<u>28,489</u>	<u><i>14,296</i></u>
Total	<u><u>1,140,294</u></u>	<u><u><i>837,326</i></u></u>

The number of employees whose salary exceeded £60,000 was:

	2023	<i>2022</i>
	No.	<i>No.</i>
Between £90,001 - £100,000	1	<i>1</i>
Between £80,001 - £90,000	1	<i>-</i>
Between £70,001 - £80,000	-	<i>1</i>
Between £60,001 - £70,000	1	<i>-</i>

The key management personnel are the Trustees, the Chairman of the Scientific Advisory Committee and the CEO. All grant proposals, strategic and financial plans and personnel appointments are vetted by the Trustees. Apart from the payment of expenses, the only post which is remunerated is that of the CEO (annual remuneration: £104,630 (2022: £97,577)).

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10. Property and Equipment

	Long Leasehold Property £	Office Equipment £	Total £
Cost			
As at 1 April 2022	1,024,783	4,060	1,028,843
Additions	<u>-</u>	<u>-</u>	<u>-</u>
As at 31 March 2023	<u>1,024,783</u>	<u>4,060</u>	<u>1,028,843</u>
Depreciation			
As at 1 April 2022	81,762	4,060	85,822
Charge for the year	<u>20,496</u>	<u>-</u>	<u>20,496</u>
As at 31 March 2023	<u>102,258</u>	<u>4,060</u>	<u>106,318</u>
Net Book Value			
As at 31 March 2023	<u>922,525</u>	<u>-</u>	<u>922,525</u>
<i>As at 31 March 2022</i>	<u><i>943,021</i></u>	<u><i>-</i></u>	<u><i>943,021</i></u>

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11. Debtors

Debtors due within one year

	2023	<i>2022</i>
	£	£
Donations Receivable	-	-
Other debtors	515,868	<i>251,852</i>
Amount due from related entity	317,192	<i>140,508</i>
Prepayments	<u>98,625</u>	<u><i>56,844</i></u>
	<u>931,685</u>	<u><i>449,204</i></u>

Where the amount due from related entity above relates to the related party transaction with Prostate Cancer Research Inc (see note 17).

Debtors more than one year

	2023	<i>2022</i>
	£	£
Prepayments	<u>44,628</u>	<u><i>3,370</i></u>

12. Cash and cash equivalents

	2023	<i>2022</i>
	£	£
Cash	823,536	<i>1,045,808</i>
Fixed term deposits	<u>786,642</u>	<u><i>607,571</i></u>
	<u>1,610,178</u>	<u><i>1,653,379</i></u>

Where fixed term deposits represent cash being held to maturity for durations longer than 3 months.

PROSTATE CANCER RESEARCH
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13. Creditors – amounts falling due within one year

	2023	<i>2022</i>
	£	£
Creditors Control Account	143,453	<i>103,700</i>
Accruals	472,287	<i>241,716</i>
Deferred Income	158,676	<i>34,041</i>
Other creditors	<u>10,288</u>	<i><u>8,192</u></i>
	<u>784,704</u>	<i><u>387,649</u></i>

Deferred Income Reconciliation

At 31 March 2023 the charity had received donations specifically for future funding events.

	2023	<i>2022</i>
	£	£
Balance brought forward	34,041	<i>104,804</i>
Movement in the year	<u>124,635</u>	<i><u>(70,763)</u></i>
At 31 March 2023	<u>158,676</u>	<i><u>34,041</u></i>

14. Net (debt)/cash– current year

	<i>At 1 April 2022</i>	Cash flow	At 31 March 2023
	£	£	£
Cash at bank and in hand	<i>1,045,808</i>	<i>(222,272)</i>	823,536
Fixed term deposits included in cash equivalents	<i>607,571</i>	<i>179,071</i>	786,642
Fixed term deposits (current & fixed assets)	<i>-</i>	<i>-</i>	<i>-</i>
Fixed term current	<u>515,000</u>	<u>(515,000)</u>	<u>-</u>
Net (debt)/cash	<u>2,168,379</u>	<u>(558,201)</u>	<u>1,610,178</u>

Net (debt)/cash - comparative

	<i>At 1 April 2021</i>	Cash flow	<i>At 31 March 2022</i>
	£	£	£
Cash at bank and in hand	<i>1,343,434</i>	<i>(297,626)</i>	<i>1,045,808</i>
Fixed term deposits included in cash equivalents	<i>251,227</i>	<i>356,344</i>	<i>607,571</i>
Fixed term deposits (current & fixed assets)	<i>260,000</i>	<i>(260,000)</i>	<i>-</i>
Fixed term current	<u>335,000</u>	<u>180,000</u>	<u>515,000</u>
Net (debt)/cash	<u>2,189,661</u>	<u>(21,282)</u>	<u>2,168,379</u>

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15. Analysis of net assets between funds – current year

	Unrestricted	Restricted	Total funds
	£	£	£
Fixed assets	922,525	-	922,525
Fixed term Investments	-	-	-
Debtors	976,313	-	976,313
Cash and cash equivalents	1,295,800	314,378	1,610,178
Creditors	<u>(784,704)</u>	<u>-</u>	<u>(784,704)</u>
Net assets at the end of year	<u>2,409,934</u>	<u>314,378</u>	<u>2,724,312</u>

Analysis of net assets between funds – comparative

	<i>Unrestricted</i>	<i>Restricted</i>	<i>Total funds</i>
	<i>£</i>	<i>£</i>	<i>£</i>
<i>Fixed assets</i>	<i>943,021</i>	-	<i>943,021</i>
<i>Fixed term Investments</i>	<i>515,000</i>	-	<i>515,000</i>
<i>Debtors</i>	<i>452,574</i>	-	<i>452,574</i>
<i>Cash and cash equivalents</i>	<i>1,545,492</i>	<i>107,887</i>	<i>1,653,379</i>
<i>Creditors</i>	<i><u>(387,649)</u></i>	<i><u>-</u></i>	<i><u>(387,649)</u></i>
<i>Net assets at the end of year</i>	<i><u>3,068,438</u></i>	<i><u>107,887</u></i>	<i><u>3,176,325</u></i>

PROSTATE CANCER RESEARCH
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16. Funds – Current year	At 1 April 2022		Income		Expenditure		Other recognised gains		Transfers		At 31 March 2023	
	£		£		£		£		£		£	
Unrestricted Funds												
General	343,764		1,837,875		(1,110,372)		-		(870,764)		200,503	
Designated Funds												
Grants	1,664,729		-		(1,473,398)		-		976,214		1,167,545	
Support and working capital	116,924		-		-		-		2,437		119,361	
Property	943,021		-		(20,496)		-		-		922,525	
	2,724,674		-		(1,493,894)		-		978,651		2,209,431	
Total unrestricted funds	<u>3,068,438</u>		<u>1,837,875</u>		<u>(2,604,266)</u>		<u>-</u>		<u>107,887</u>		<u>2,409,934</u>	
Restricted Funds												
	<u>107,887</u>		<u>1,164,925</u>		<u>(850,547)</u>		<u>-</u>		<u>(107,887)</u>		<u>314,378</u>	
Total funds	<u>3,176,325</u>		<u>3,002,800</u>		<u>(3,454,813)</u>		<u>-</u>		<u>-</u>		<u>2,724,312</u>	

Designated funds

Grants represents funds set aside to finance grants that have been awarded for the duration of the grants.

The Support and Working Capital Fund is considered to be the minimum amount required in order to manage an orderly, and solvent wind down of the charity.

Property represents the value invested in headquarters to enable the ongoing operations and activities of the Charity, as identified in Note 10.

A transfer has been made from unrestricted reserves to designated funds so that the level of designated funds carried forwards are equal to amounts that are expected to be paid for the duration of the grants for 1 year. Grants have been awarded for periods of up to five years and therefore their funds are expected to be utilised within this five year period, barring any unforeseen circumstances.

Restricted Funds

Restricted funds are where the donor has imposed restrictions on the use of the funds. A transfer has been made from restricted funds into designated funds, so that the level of restricted funds carried forward is equal to the unspent restricted income received in the year. All other restricted income received to date, has now been fully expensed.

**PROSTATE CANCER RESEARCH
NOTES TO THE FINANCIAL STATEMENTS
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16. Funds (continued) - Comparative

	At 1 April 2021	Income	Expenditure	Other recognised gains	Transfers	At 31 March 2022
	£	£	£	£	£	£
<i>Unrestricted Funds</i>						
General	453,847	2,207,696	(1,083,831)	-	(1,233,948)	343,764
<i>Designated Funds</i>						
Grants	1,588,751	-	(1,158,156)	-	1,234,134	1,664,729
Support and working capital	101,000	-	-	-	15,924	116,924
Property	963,517	-	(20,496)	-	-	943,021
	2,653,268	-	(1,178,652)	-	1,250,058	2,724,674
<i>Total unrestricted funds</i>	<u>3,107,115</u>	<u>2,207,696</u>	<u>(2,262,483)</u>	<u>-</u>	<u>16,110</u>	<u>3,068,438</u>
<i>Restricted Funds</i>						
	16,110	468,125	(360,238)	-	(16,110)	107,887
<i>Total funds</i>	<u>3,123,225</u>	<u>2,675,821</u>	<u>(2,622,721)</u>	<u>-</u>	<u>-</u>	<u>3,176,325</u>

**PROSTATE CANCER RESEARCH
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

17. Related Party Transactions

A grant of £1.5 million, payable over five years, was awarded to Kings College London. The grant is managed by Professor Prokar Dasgupta of King's College London, who was a Trustee until 29/06/21. Mr Dasgupta was not involved in the decision to award the grant. The grant was peer-reviewed by the external scientific committee (consisting of three eminent scientists from outside the UK) and awarded in competition with other proposals. Professor Dasgupta was not party to the selection process. At the year end, £131,150 (2022: £270,928) is included within accruals in respect of this grant, representing the final instalment of this year's grant payment.

A loan has been agreed to cover expenses related to Prostate Cancer Research Inc. (having incorporated PCR Inc. as a sister Charity organisation). The loan shall be calculated from 1 December 2020. This loan shall not attract any form of interest on repayment. The balance due to Prostate Cancer Research (UK) as at 31 March 2023 is £317,191 (2022: £140,508).

18. Trustees

The Trustees received no remuneration (2022: £nil). In addition, no Trustee was paid or received any expenses during the year (2022: £nil). There were no trustee meeting expenses during the year as these were all held virtually (2022: £nil).

19. Financial Instruments

Financial assets held at fair value are all investments. Financial assets held at amortised cost are cash and cash equivalents, short term deposits and debtors minus prepayments.

Financial liabilities held at amortised cost are creditors due in less than one year plus creditors due in more than one year minus taxation payable and deferred income.

	2023 £	2022 £
Financial assets measured at amortised cost	<u>2,443,238</u>	<u>2,560,739</u>
Financial liabilities measured at amortised cost	<u>626,028</u>	<u>353,608</u>

The entity's income, expense, gains and losses in respect of financial instruments are summarised below:

	2023 £	2022 £
Total interest income for financial assets held at fair value	<u>13,336</u>	<u>14,962</u>
Total interest income for financial assets held at amortised cost	<u>1,854</u>	<u>-</u>

PROSTATE CANCER RESEARCH
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20. Statement of Financial Activities – Comparative

	<i>Unrestricted funds £</i>	<i>Restricted funds £</i>	<i>Total funds 2022 £</i>
<i>Income and endowments from:</i>			
<i>Donations and legacies</i>	2,192,734	468,125	2,660,859
<i>Investments</i>	14,962	-	14,962
<i>Other income</i>	<u> </u>	<u> </u>	<u> </u>
<i>Total income</i>	<u>2,207,696</u>	<u>468,125</u>	<u>2,675,821</u>
<i>Expenditure on:</i>			
<i>Raising funds</i>	879,060	-	879,060
<i>Charitable activities</i>	<u>1,383,423</u>	<u>360,238</u>	<u>1,743,661</u>
<i>Total expenditure</i>	<u>2,262,483</u>	<u>360,238</u>	<u>2,622,721</u>
<i>Net movement in funds</i>	<u>(54,787)</u>	<u>107,887</u>	<u>53,100</u>
<i>Transfer of funds</i>	16,110	(16,110)	-
<i>Fund balances brought forward at 31 March 2021</i>	<u>3,107,115</u>	<u>16,110</u>	<u>3,123,225</u>
<i>Fund balances carried forward at 31 March 2022</i>	<u>3,068,438</u>	<u>107,887</u>	<u>3,176,325</u>